

State of Minnesota**District Court**

County _____

Judicial District: _____

Court File Number: _____

Case Type: _____

☐ In Re the Marriage of:

Plaintiff / Petitioner

vs / and

Defendant / Respondent_____
Intervenor**Affidavit of**_____
(Fill in your name)_____, **being first duly sworn/affirmed, says that:**
(Your name)

1. I am the Petitioner/Plaintiff/Respondent/Defendant (circle one) in this action:

2. I am employed by:

Employer _____

Address _____

Work Number _____ Occupation _____

Length of Employment _____ Supervisor _____

Gross Pay _____

Net Pay _____ per Monthly / Weekly / Semi-Monthly / Bi-Weekly
(circle one)

Number of withholding exemptions _____

3. I was previously employed by _____ for _____ years.

4. I have the following additional sources of income:

Source: _____ \$ _____ per month

Source: _____ \$ _____ per month

Source: _____ \$ _____ per month

5. There has not been a sufficient cost-of-living or other increase in my income to allow for an adjustment in my child support.

6. Copies of my tax returns and any other documentation of my income for the past three years,
_____, _____ and _____ is provided to the other party of this action

(year) (year) (year)

and the county attorney as an attachment and provided to the Court Administrator.

7. I am submitting this affidavit in support of my motion to stop the cost-of-living adjustment.

Dated: _____

Sworn / affirmed before me this

_____ day of _____, _____

Signature *(Sign only in presence of Notary or Court Deputy)*

Notary Public / Deputy Court Administrator